

Report to the Division of Aging Services

Community Care Services Program Adult Day Health Services Report SFY 2008

July 15, 2008

Planning and Evaluation Section Quality Assurance Team



- Understanding practice to improve results and enhance lives.



**Department of Human Resources
Division of Aging Services**

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I. Introduction and Methodology

In collaboration with the Community Care Services Program (CCSP) staff, the Quality Assurance Team (QAT) conducted a statewide review of CCSP Adult Day Health (ADH) Services. The review was divided into three categories: Part I – Administrative Compliance with staffing and quality assurance requirements, Part II – Registered Nurse (RN) Supervision and Clinical Records, and Part III – Consumer Satisfaction with a focus on staff responsiveness, privacy, transportation, food and activities.

The results of this survey, compared to data collected in 2006 and 2007, will enable CCSP staff to further assess provider performance and identify training needs specific to this service.

ADH centers enrolled in the program with CCSP consumers of all ages having received 6 months or more of ADH services between September 2007 and April 2008 were identified in AIMS. Fifty-one (51) ADH centers and 377 consumers were identified as meeting the criteria. QAT was asked to administer the three-part review at 100% of the centers.

Unannounced visits were made in May and June 2008 and took place in private settings within the centers. When possible, two CCSP consumer records per ADH center were reviewed. Two consumers per center were interviewed for service satisfaction when possible. Centers identified by the QAT as needing technical assistance were reported to CCSP staff for follow-up immediately after the review was completed.

II. Findings

This report includes statewide findings for compliance reviews for 46 centers. This represents 100% of centers in the initial sample that were currently operating. Four centers had closed and one was determined to be bad data in the sample. Seventy-nine consumer records were reviewed. Of the 377 consumers meeting criteria, 64 consumers were interviewed for satisfaction. In some instances a center served only one CCSP consumer. Some consumers were not in attendance and some were too cognitively impaired.

Part I, Policy & Compliance findings include 50% non-compliance with ongoing disaster training. In addition, 76% of facilities had established policies for self-evaluation and 59% statewide were **unable** to produce a written report of an annual self-evaluation review.

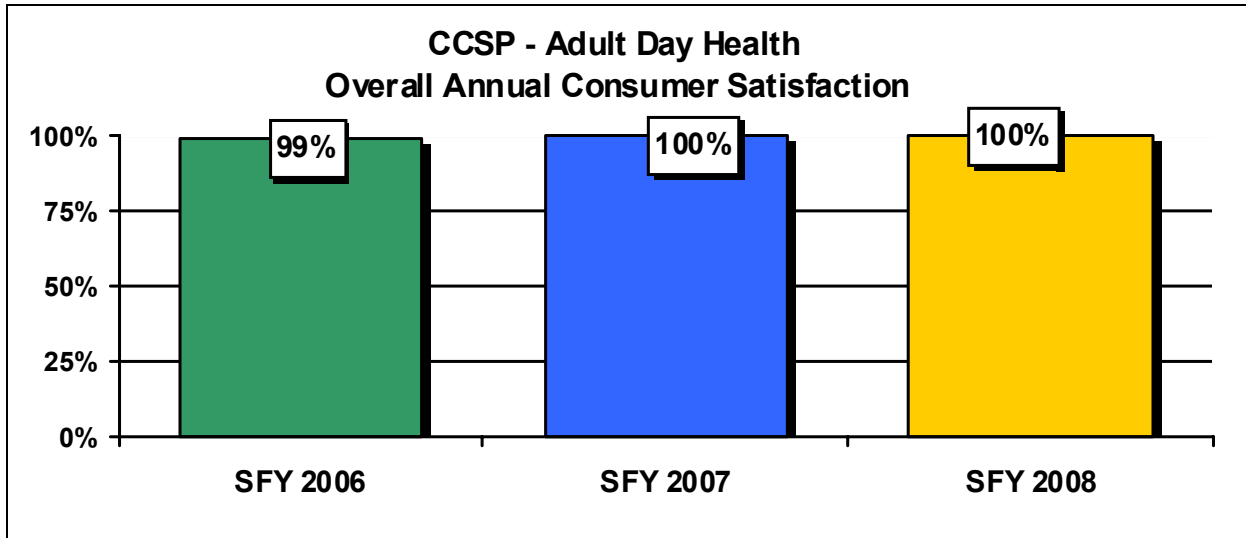
Part II Clinical Records review requires the Registered Nurse (RN) to review and sign a consumer's care plan at least once per month. Compliance for monthly care plan reviews was documented in 55 (70%) of the 79 records reviewed. Additionally 73 of the supervisory visits were timely resulting in 92% compliance.

The data for both the compliance and records reviews indicate a need for improvements in provider performance in almost all of the categories investigated.

III. Annual Comparison of Overall Consumer Satisfaction

The chart below is the annual comparison of the positive responses for all three years of data. As with SFY 2007, 100% of the consumers interviewed in SFY 2008 were satisfied with the centers overall.

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III. Recommendations

- A. CCSP follow up with the individual provider site issue reports as forwarded by QAT to (1) establish communications with the providers and (2) to provide technical assistance to resolve all issues.
- B. CCSP follow-up with the points of data entry for CCSP clients in AIMS. The client sample had many discrepancies, such as (1) clients indicated at sites which were closed, (2) some clients had transitioned from one site to a second site, received services at the second site, and now, no longer in attendance at the second site, (3) incorrect addresses, (4) clients listed that did not attend the center and, according to center reps, had never attended, and (5) incomplete census data for some centers. (Note: Possible variation in pulling the sample from previous methodology or clients not meeting the criteria and timeframe for review could account for some of the incomplete census data.)
- C. CCSP to provide written notification of (1) the statewide results from all three reviews and (2) clarification for all performance categories investigated in the “compliance” and “records” reviews to Adult Day Health providers statewide.
- D. Regional Coordinators (RC) target specifically the Adult Day Health sites represented in this report for SFY 2009’s review to trend their performance.
- E. CCSP & RC’s to re-evaluate questions # 2 and #3 of the clinical records review for the 2009 review. These questions could be structured to better reflect progress toward the established WIG goals, “To reduce the number of incidents that may lead to death or serious injury to consumers in our care, custody or oversight”.

Attachments:

- Appendix A: Part 1 – Policy & Compliance Statewide Data
- Appendix B: Part 1 – Policy & Compliance Data by AAA
- Appendix C: Part 2 – Record Review Statewide Data
- Appendix D: Part 2 – Record Review by Data by AAA
- Appendix E: Consumer Satisfaction Statewide Data